Washington D.C. Housing Supportive Services (HSS) Medicaid Academy
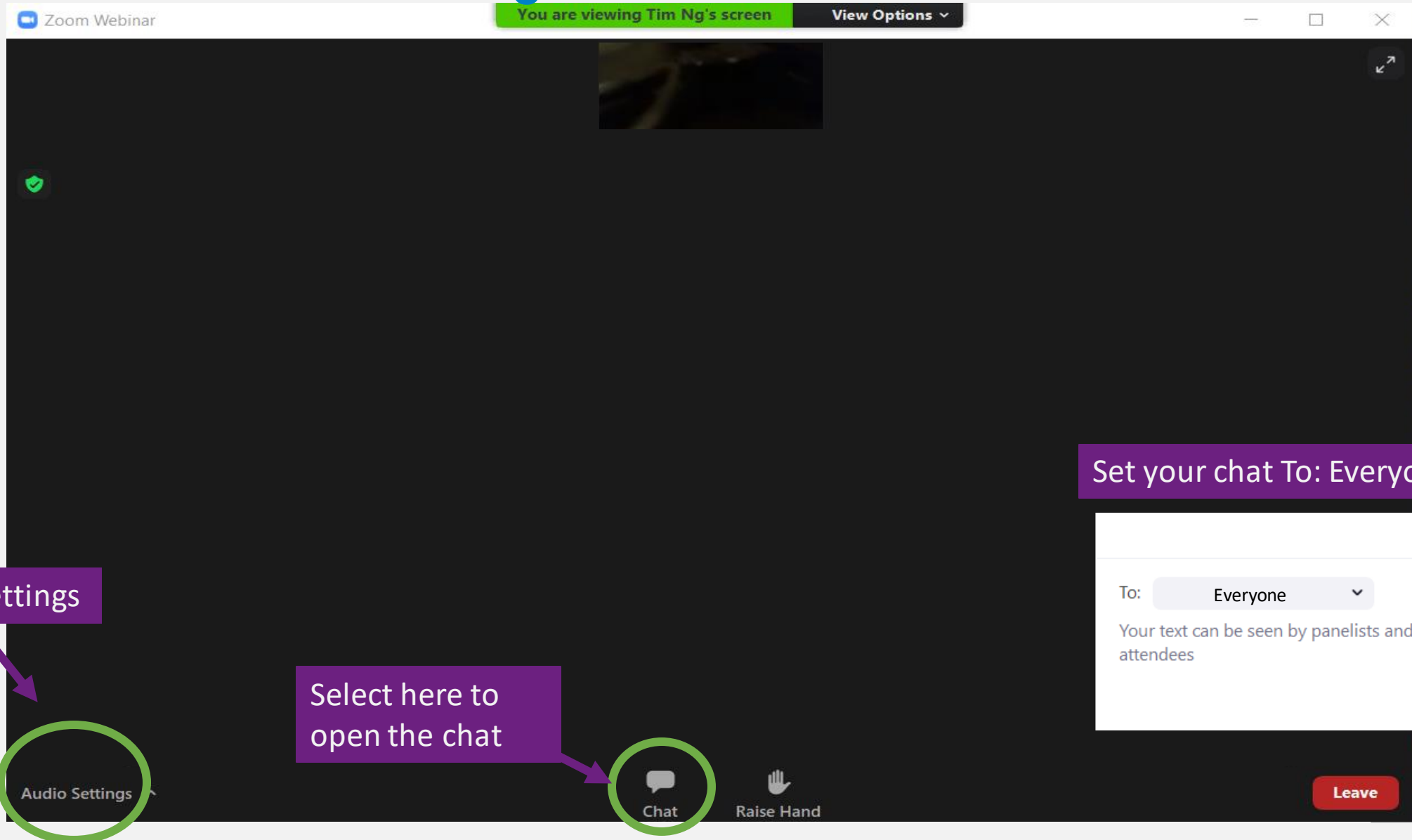
Session #2
Participant Enrollment

August 2, 2022

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Welcome to the Washington, DC Medicaid Academy

Meet Our Training Team

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Purpose of Medicaid Academy Learning Sessions

DHCF and DHS provide the **WHAT**= **Policy requirements**

The TA Team helps with the **HOW** = Supporting your team to develop a **Successful Work Plan**

Each session will include:

- Helpful tips and tools
- Opportunities for sharing experiences across agencies
- Coaching for your agency

DHS on PSH

The approved State Plan Amendment

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Plan for Today: Session 2

✓ Review Medicaid and HSS eligibility in DC

✓ Review process for enrolling current and future clients in Housing Supportive Services

✓ Consider how to ensure that your clients maintain Medicaid enrollment and HSS enrollment over the long term.

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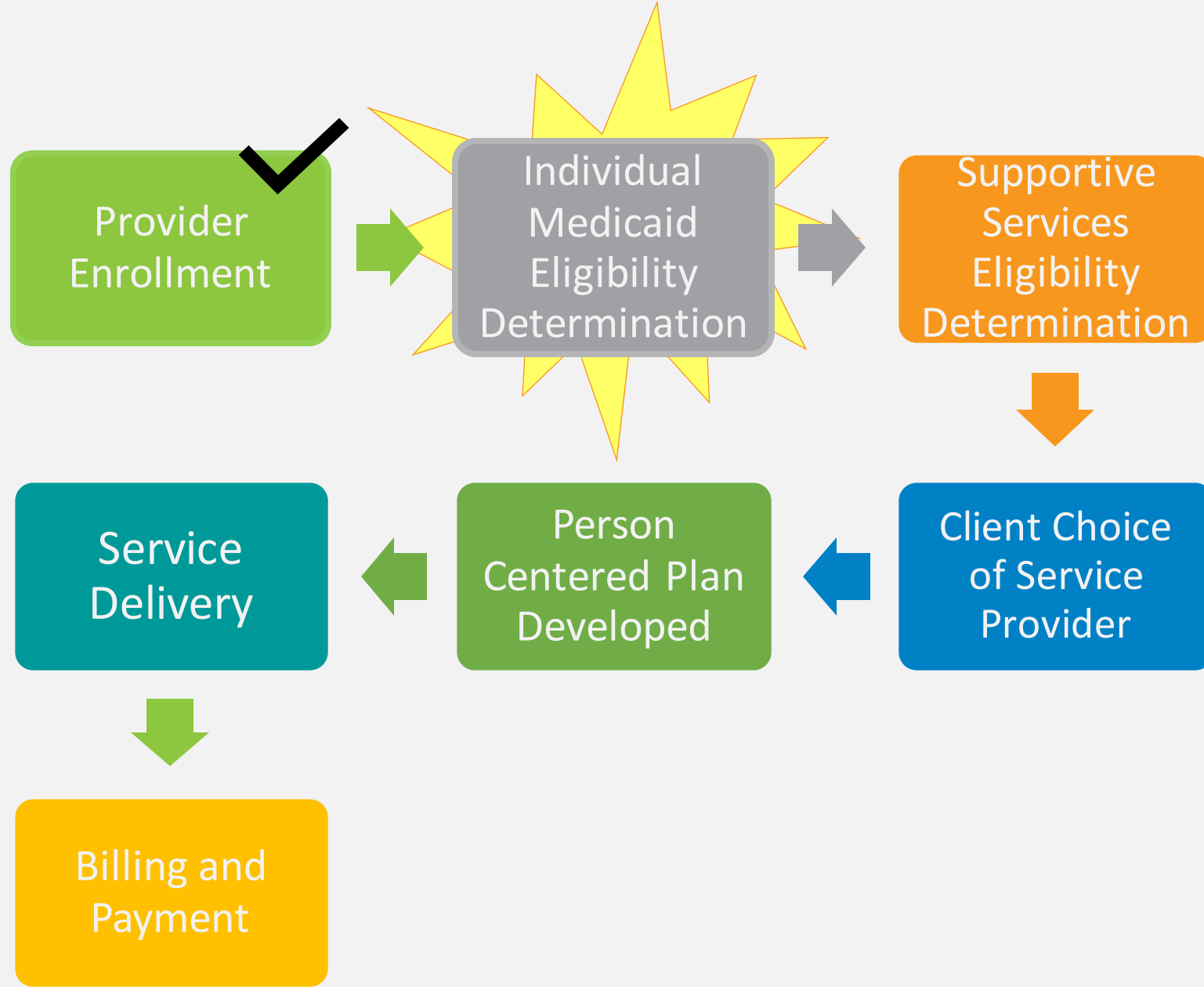
Medicaid Housing Supportive Services Process

A Person's Medicaid Status: Eligible or Enrolled

Individuals

Apply for DC Medicaid here!

To be eligible for the Medicaid in the District, applicants must be residents of the District and must meet financial eligibility requirements.

Currently, 1 out of every 3 District residents is enrolled in the District's Medicaid program.

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Check Recipient Eligibility Verification

- Your agency needs to complete provider enrollment first; you cannot use this system without an agency Medicaid ID # that you receive when you have successfully completed provider enrollment.

- Once enrolled your agency can use the Interactive Voice Response System to confirm Medicaid enrollment

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Recipient Eligibility Verification

Eligibility Verification Web Portal:

www.dc-medicaid.com

Must have Web account

Inquiry Options > Eligibility Inquiry

Print eligibility results

Recipient Eligibility Verification

Verify the following:

- Recipient name and identification number
- Dates of eligibility
- If recipient has other insurance (e.g., Medicare, Managed Care, etc.)
- Verify at least once per month to ensure payment. If the person you are serving is not ENROLLED on the day of service, your agency will not get paid.

Using the Interactive Voice Response (IVR): Call (202) 906-8318 and record confirmation number received at the end of the call.

Eligibility Inquiry Result	
Recipient Eligibility Information requested / verified on:	09/11/2019

Recipient Detail	
First Name:	JOHN
Middle Name:	D
Last Name:	
Recipient ID:	.
Recipient Address:	
Ward/Quadrant:	05/NE
Gender:	Male
Date Of Birth:	
Re-cert Date:	09/01/2019

Plan Coverage Information	
Plan Coverage:	MA 1915(C) EPD WAIVER + QMB
Program Code:	853Q
Eligibility or Benefit Information:	ACTIVE
Begin Date:	02/01/2019
End Date:	12/31/9999
QMB Indicator:	NO
Case Number:	00123149
⊞ Service types	

Service Management	
N/A	

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CHECK MONTHLY THAT MEDICAID COVERAGE STAYS UP TO DATE AND IF INSURANCE PROVIDER HAS CHANGED

ELIGIBILITY WILL NEED TO BE RENEWED AFTER ONE YEAR

DC WILL ALSO BE REVIEWING ALL PERSONS ELIGIBILITY AS THE PUBLIC HEALTH EMERGENCY ENDS

Continuous monitoring for eligibility

Tool Alert:

Eligibility Tracker

District of Columbia's Housing Supportive Services Medicaid Benefit

Individual Medicaid Eligibility Determination

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DC's Housing Supportive Services Eligibility Criteria

All persons eligible for the District's Permanent Supportive Housing (PSH) program are eligible to receive services through the Medicaid HSS benefit, **if** they are enrolled in the Medicaid program.

HSS are activities that:

- help people transition from homelessness to housing of their own choice in the community (also called Housing Navigation Services); and
- help people sustain living in their own housing in the community (also called Housing Stabilization Services)

DC State Plan Amendment_March 2022.pdf

Eligibility for Housing Supportive Services

Medical Assistance recipient who is 18 years old or older

Functional Limitations as a result of a disability

+

Chronic Homeless, current, at risk or historical

+

Need for services due to limitations caused by the individual's disability

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DC's Housing Supportive Services Eligibility Criteria

Eligible persons must meet **ALL** of the following 5 criteria:

1. 18 or older

2. Documented disability including SUD

3. Functional limitations in
   - Mobility OR
   - Decision making OR
   - Healthy Social Relationships OR
   - Assistance Meeting Basic Needs OR
   - Challenging Behaviors

DC State Plan Amendment_ March 2022.pdf

DC's Housing Supportive Services Eligibility Criteria cont'd

Eligible persons must meet **ALL** of the following 5 criteria (cont'd):

4. Housing Instability
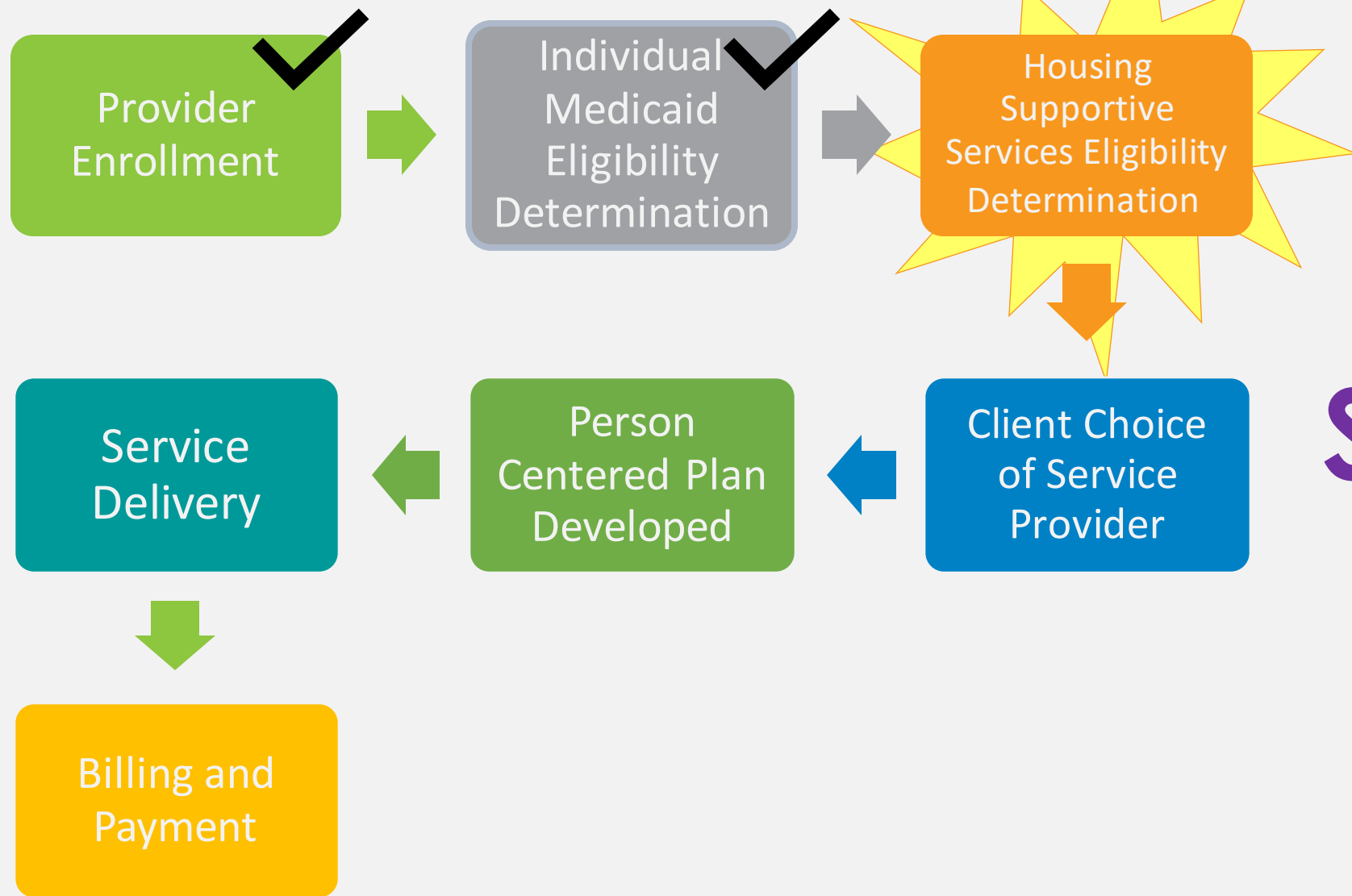   - Chronic Homeless OR
   - At risk of chronic homeless OR
   - History of Chronic Homelessness

5. Needs assistance at least monthly

DC State Plan Amendment_ March 2022.pdf

Breakout Room Questions
Add to your
Agency's Work Plan

- what tracking does my agency have of resident's benefits?
- what tracking do we need to set up to ensure continuous health care coverage?

Sample Work Plan

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Medicaid Housing Supportive Services Process

Provider Enrollment → Individual Medicaid Eligibility Determination → Housing Supportive Services Eligibility Determination → Client Choice of Service Provider → Person Centered Plan Developed → Service Delivery → Billing and Payment

Assessment Process

Conflict Free Assessment

NEW COMPONENT

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DHS Conflict Free Assessment Process

Persons receiving services through the Medicaid HSS benefit require "conflict free" assessments and person-centered care plan development, meaning that the person completes a virtual and/or face-to-face assessment with an individual who is <u>not</u> employed by the same organization that will be delivering HSS or other HCBS to them.

The District's Department of Human Services (DHS) will employ a team of workers who will meet with persons to complete these assessments, ensure persons are offered a choice of service providers, and help each person develop a person-centered service plan which will incorporate choices about where they will get housing and other services.

DHS Assessment Process:

Persons Not Yet Enrolled in PSH Program

HSS Enrollment Process for Persons Not Yet Enrolled in a PSH Program

The outreach worker, shelter provider, or DHS staff completes a standardized homeless services screening tool with the person experiencing homelessness.
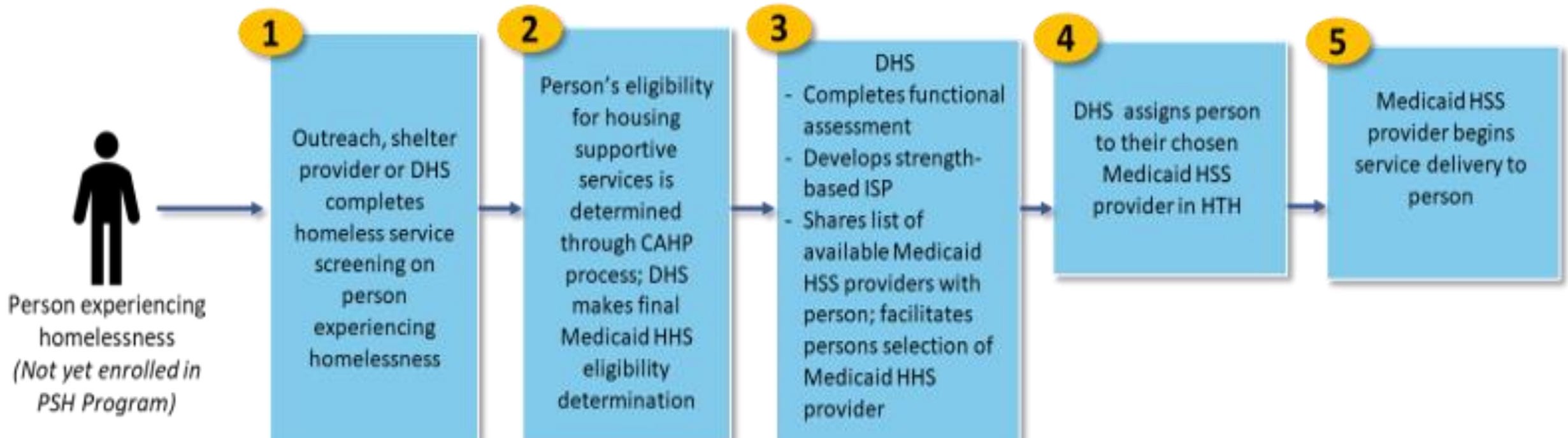
Using the results of the screening tool, plus other available information about the person, the person's eligibility and prioritization for the Permanent Supportive Housing (PSH) Program is determined through DC's Coordinated Assessment and Housing Placement (CAHP) process.

DHS Assessment Process:

Persons Not Yet Enrolled in PSH Program

HSS Enrollment Process for Persons Not Yet Enrolled in a PSH Program (cont.)

○ DHS works with the person experiencing homelessness to complete a virtually/face-to-face functional assessment, provide information to facilitate the choice of HSS provider, and create a person-centered service plan.

- When needed, DHS will work closely with the person's outreach or shelter provider, and/or other trusted entities, in order for DHS to jointly complete the person-centered service plan.

○ To ensure that this process can be completed as safely and quickly as possible, DHS staff may use telehealth (telephone or video) to meet with the person, and with the person's consent, this may include their current service provider and/or a trusted support person.

○ DHS supports the person's selection of an HSS provider and officially links the person to their selected HSS provider in DHS's web-based case note platform, Housing the Homelessness (HTH).

○ DHS will request a **Prior Authorization Code** from DHCF and enter it into HTH.

The Path to Services- Not Yet Enrolled in PSH

Person experiencing homelessness (Not yet enrolled in PSH Program)

1 Outreach, shelter provider or DHS completes homeless service screening on person experiencing homelessness

2 Person's eligibility for housing supportive services is determined through CAHP process; DHS makes final Medicaid HHS eligibility determination

3 DHS
- Completes functional assessment
- Develops strength-based ISP
- Shares list of available Medicaid HSS providers with person; facilitates persons selection of Medicaid HHS provider

4 DHS assigns person to their chosen Medicaid HSS provider in HTH

5 Medicaid HSS provider begins service delivery to person

Repeat, after a year or when services needs change, whatever comes first. DHS will request and update Prior Authorization Code

DHS Assessment Process:

Persons Participating in PSH Program

HSS Enrollment Process for Persons Participating in a PSH Program

DHS meets with PSH provider to confirm the cohort of persons on their enrollment roster, and whether each person is receiving Housing Navigation Services, to identify and secure housing, or Housing Stabilization Services, to sustain their tenancy through the PSH program

DHS schedules time with each person receiving Housing Stabilization Services for assessment and service plan development. As needed, DHS will consult with the PSH provider delivering the Housing Stabilization Services to identify an assessment time.

DHS Assessment Process:

Persons Participating in PSH Program

HSS Enrollment Process for Persons Participating in a PSH Program

DHS works with the person receiving Housing Stabilization Services to complete a face-to-face functional assessment, provide information to facilitate the choice of HSS provider, and update the person's existing person-centered service plan.

DHS Assessment Process:

Persons Participating in PSH Program

HSS Enrollment Process for Persons Participating in a PSH Program

When needed, DHS will work closely with the person's PSH provider and other trusted entities, in order for DHS to jointly complete the person-centered service plan.

DHS staff may use telehealth (telephone or video) to meet with the person, and with the person's consent, this may include their current service provider and/or a trusted support person.

DHS Assessment Process:

Persons Participating in PSH Program

HSS Enrollment Process for Persons Participating in PSH Program

DHS supports the person's choice to continue to receive services from their existing HSS provider or to select a new one.

DHS Assessment Process:

Persons Participating in PSH Program

If a client chooses to remain with their existing HSS provider, DHS confirms that the person is linked to their HSS provider in DHS's web-based case note platform, Housing the Homelessness (HTH).

DHS Assessment Process:

Persons Participating in PSH Program

If the person chooses to select a new HSS provider, DHS notifies the person's current and newly selected HSS provider of the choice made, confirms the person's transition plan with each provider, and then notates the person's chosen provider and transition date in HTH.

The transition date shall be the first day of the month following the date in which the person's choice is conveyed to DHS.
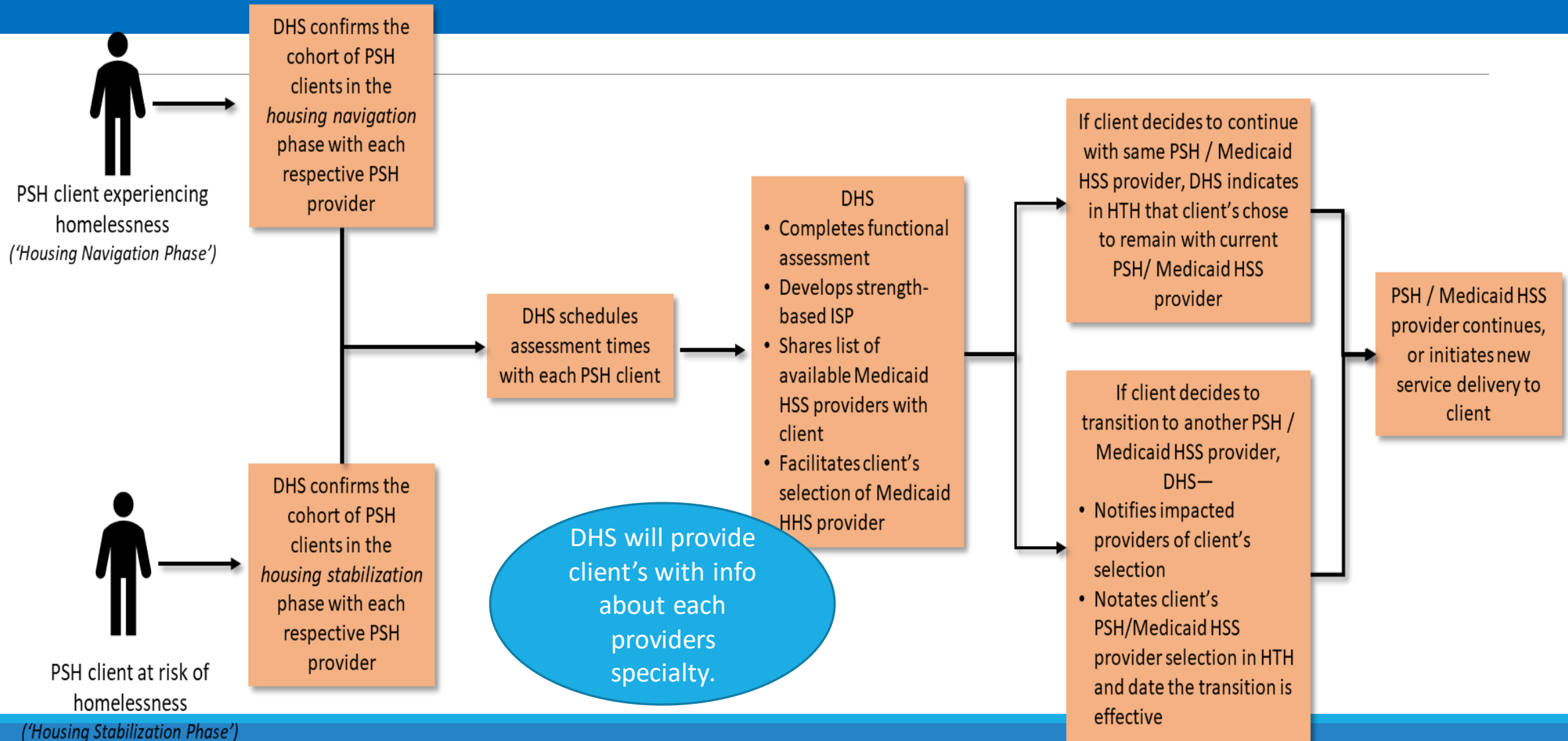
DHS Assessment Process:

Persons Participating in PSH Program

In instances when the client chooses to receive services from a another HSS provider, the current HSS provider shall develop a transition plan that supports the person's successful transition to the new HSS provider.
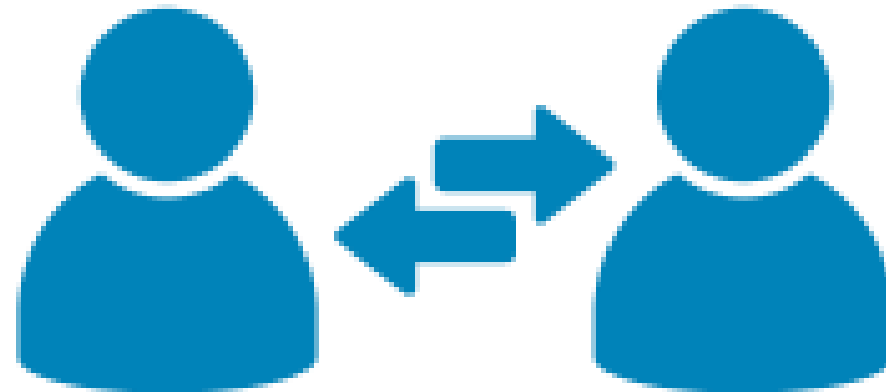
The Path to Services- Participating in PSH

PSH client experiencing homelessness
('Housing Navigation Phase')

PSH client at risk of homelessness
('Housing Stabilization Phase')

DHS confirms the cohort of PSH clients in the *housing navigation* phase with each respective PSH provider

DHS confirms the cohort of PSH clients in the *housing stabilization* phase with each respective PSH provider

DHS schedules assessment times with each PSH client

DHS will provide client's with info about each providers specialty.

DHS
- Completes functional assessment
- Develops strength-based ISP
- Shares list of available Medicaid HSS providers with client
- Facilitates client's selection of Medicaid HHS provider

If client decides to continue with same PSH / Medicaid HSS provider, DHS indicates in HTH that client's chose to remain with current PSH/ Medicaid HSS provider

If client decides to transition to another PSH / Medicaid HSS provider, DHS—
- Notifies impacted providers of client's selection
- Notates client's PSH/Medicaid HSS provider selection in HTH and date the transition is effective

PSH / Medicaid HSS provider continues, or initiates new service delivery to client

Conflict Free Assessment

HTH Updates

NEW COMPONENT

Conflict Free Assessment on HTH

Conflict Free Assessment on HTH

| Client Contact Information | Program & Provider Assignment | Medicaid | Application | Vouchers | Unit Visits & Lease Ups | Case Management | Documents | Client Movement History | Record History |

Conflict Free Assessment

Add Conflict Free Assessment

Assessor Name	Client Full Name	Conflict Free Assessment	Participant Signed Assessment	Program	Funding Source	Submit Assessment	Client Acceptance	Date Created	Date Submitted

No Conflict Free Assessment records found

Current Assessor

Assessor Name

Conflict Free Assessment Notes
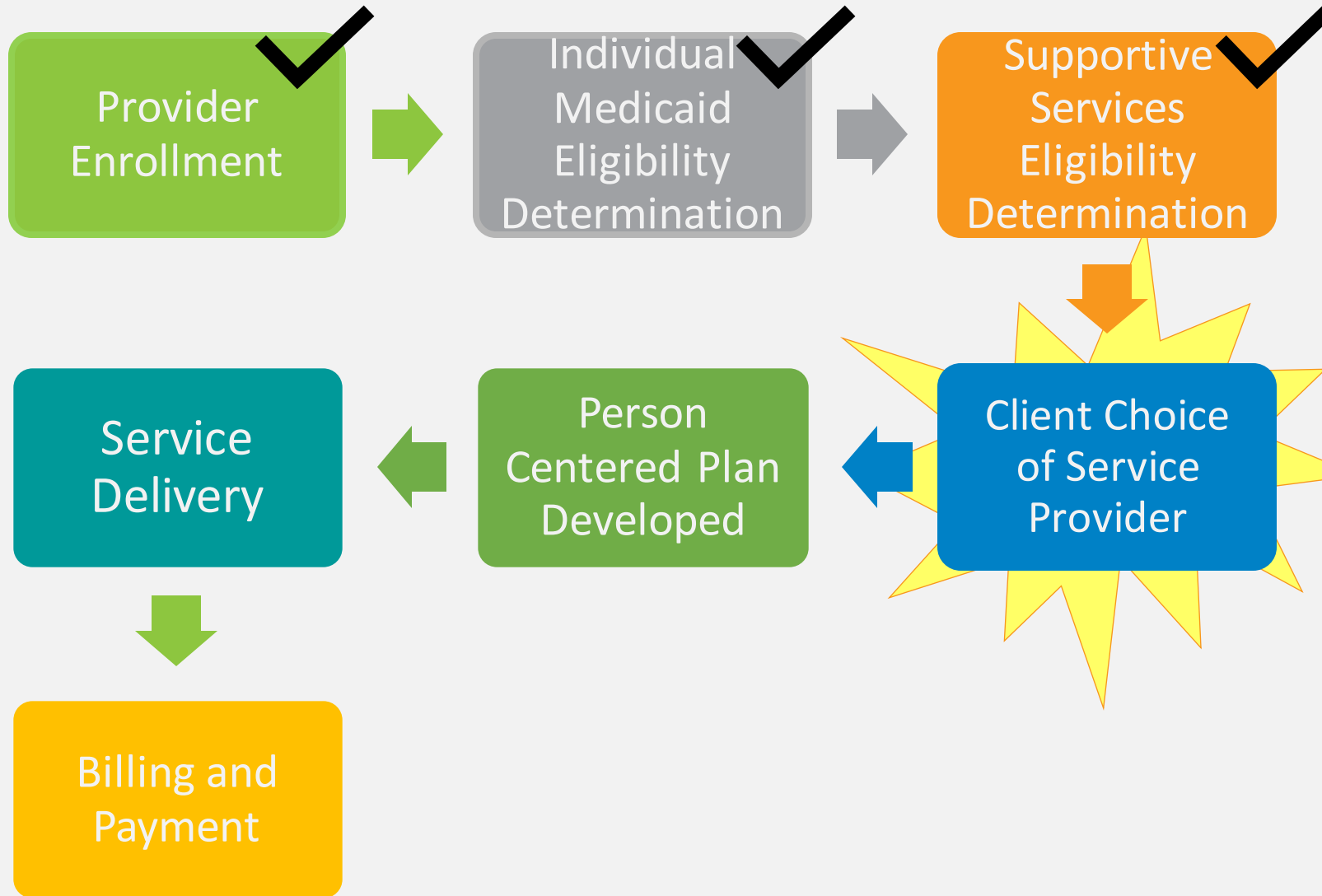
Add Conflict Free Assessment Notes

Contact Summary	Date of Contact	Time of Contact	Type of Contact	Client Full Name	Assessor

No Conflict Free Assessment Notes records found

Medicaid ID Number(s)

Add Medicaid Number

Medicaid ID Number	Notes	Date Created	Record Owner

Provider Selection Process

Participant Selection Process

Notice to Provider

Provider's next steps

NEW COMPONENT

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Accepting a referral

Who	Communicates with DHS and potential new service recipient?
How	Does your referral intersect with your housing process?
Who	Translates the Person Centered Plan (PCP) from DHS into an agency specific actionable service plan?

Prior Authorization

The Prior Authorization Code reflects who the client is, their assigned provider, services to be received, and time period these services are allowed to be delivered (in order to receive Medicaid reimbursement).

A client will have separate Prior Authorization Code for Housing Navigation and Housing Stabilization.

Housing Navigation	Can be authorized up to 6 months while someone is obtaining housing
Housing Stabilization Services	Can be authorized for up to 12 months from the date of the file Person Centered Plan
DHS role	DHS will include on the referral the Prior Authorization Number That Number is needed on all claims submitted for payment

How is your agency supporting client outreach?

TIME TO ENGAGE!

As a provider, you are supporting by sending out a letter to each client provided by DHS giving context and information about the conflict-free assessment.
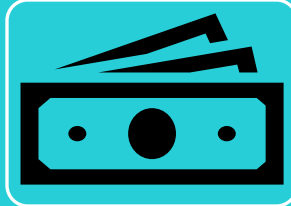
Begin now to engage your frontline staff about the conflict free assessment process to prepare them to engage with clients at the appropriate time.

Three Takeaways for Supportive Housing Providers

Is the person I want to assist Medicaid eligible? Medicaid Enrolled? What is required to get them enrolled?

Has the person been determined eligible for the District's Housing Supportive Services benefit?
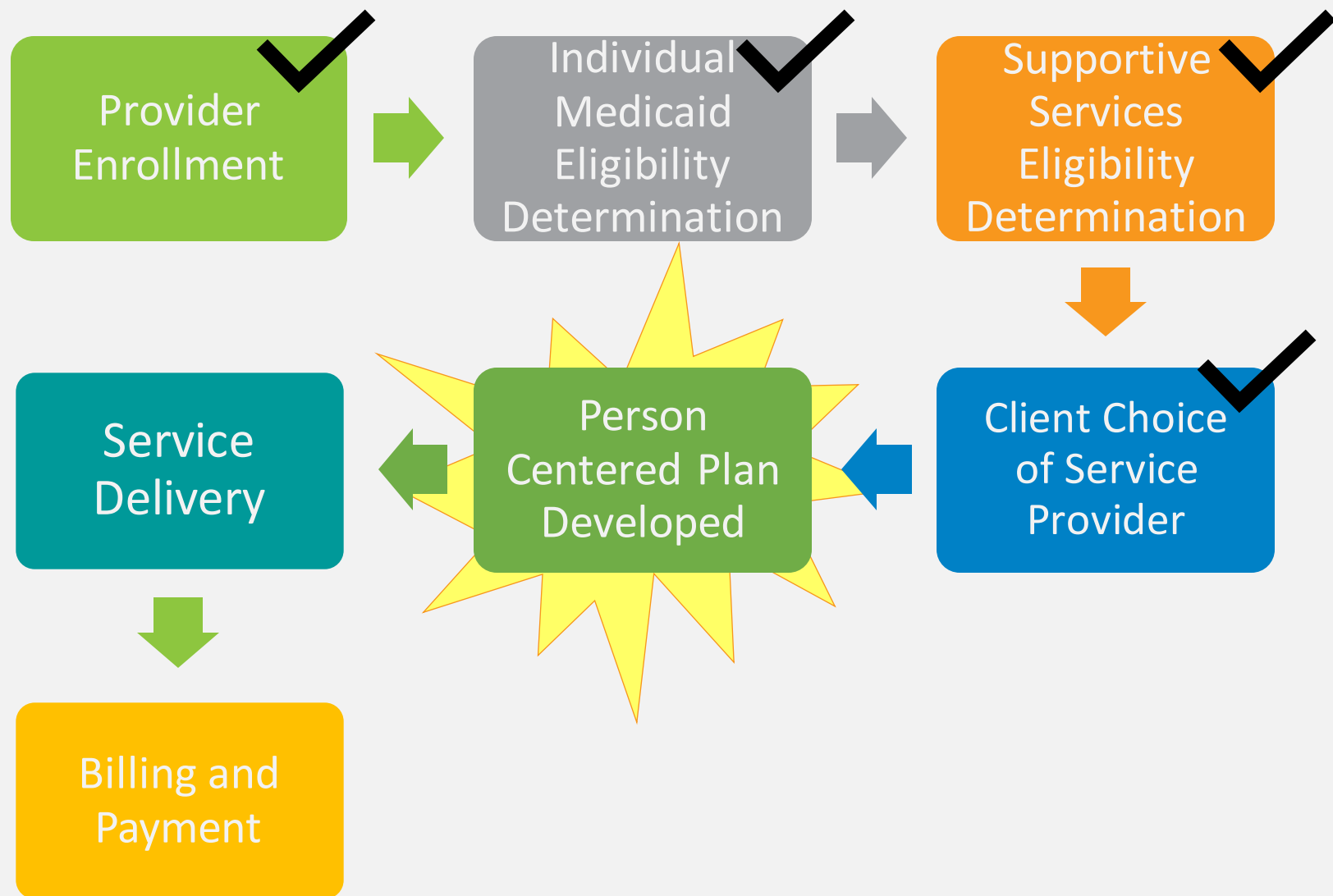
Is my agency enrolled to provide these services?

Break

New housing focused person-centered plan format

NEW COMPONENT

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Conflict Free Assessment on HTH

Mental Health & Substance Use

Mental Health & Substance Use Goals

Mental Health & Substance Use Strengths

Mental Health & Substance Use Potential Barriers

Mental Health & Substance Use (objective timeline description, etc)

After DHS loads the Assessment in to HTH you will take that information to build out the Person Centered Plan on HTH.

This is the basis for how you would document measurable objectives and timelines during that 12 month period that it would take to meet those goals.

Note: The Provider should review the measurable objectives and timelines at least quarterly and document progress.

HSS person-centered plan

Housing-focused Person-Centered Plan Sections

Person information

Emergency contacts

Guardian/conservator/rep-payee/power of attorney

About you

Housing goals

Housing Supportive Services- Navigation or Stabilization

Non-housing related goals

Risk and risk mitigation

Other provider such as TCM info

Signature sheet

Best practices: Overall approach

- ❑ The Plan should demonstrate an assessed need for services in relation to their disability or disabling condition.

- ❑ What would be helpful for the new housing provider to know about the client?

- ❑ Have prompting questions to help give people ideas.

- ❑ Ensure responses are personalized and reflect the individual needs of the client.

Best practices: The details

Make sure:

- ❑ Writing is easy clear and easy to read (if handwritten) in order for eligibility staff to review

- ❑ Fill in every space, even if answer is "None"

- ❑ Double check for missing information and that all identification numbers, names and dates are correct

- ❑ Identifying information matches between Medicaid ID, SSN and Prior Authorization Number

Breakout Discussion Questions

What processes will you have in place to gather documentation for clients? Who will complete each step? What partnerships with other agencies are needed?

Who will review eligibility requests for quality and track requests that have been submitted? Where will information be recorded?

What processes will you have to ensure continued eligibility for Medicaid and Housing Supportive Services?

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Report back

> The goal is for as limited disruption in this transition as possible
> - For your residents
> - For your staff
> - For yourself

> For the next session collect data on:
> - Which staff will be designated HSS staff and will be documenting services?
> - What are those staff currently doing and are those activities a billable service under HSS
> - Develop preliminary revenue projections

Checklist: What Staff currently provide services that would now fall under Housing Navigation Services?

Put a check near each current staff activity.

- Developing a housing transition plan*

- Supporting the person in applying for benefits

- Assisting the person with the housing search and application process

- Completing housing applications on behalf of the service recipient

- Helping the person develop a budget and negotiate a lease

- Helping the person build a relationship with a prospective landlord

- Helping the person find funding for move in costs

- Helping with the move*

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Checklist: What Staff currently provide services that would now fall under Housing Stabilization Services?

Using annotation tools and put a check near each current staff activity.

- Developing and updating housing support and crisis/safety plan

- Preventing and early identification of behaviors that may jeopardize continued housing

- Educating on roles, rights, and responsibilities of the tenant and property manager

- Coaching to develop and maintain key relationships with property managers and neighbors

- Assistance with the housing recertification processes*

- Supporting the building of natural housing supports and resources

- Working with property manager or landlord to promote housing retention*

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Wrap Up and Reflection

DC Medicaid Academy Schedule

Up Next

Q&A on today's session
Thursday, August 4th12 PM about what we learned today.

Session 3: Staffing models, cost estimates, and revenue projections for Medicaid Reimbursement
Tuesday, August 9th, 2022
3 PM -5PM EST

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Planning ahead for Session 3

Who needs to attend:
Finance and Program Lead

What do you need to gather and have access to during Session 3:

❑ Access to Staff Salaries for direct service staff, middle managers or supervisors, and Quality Improvement staff (aka personnel expenses)

❑ Access to program budget(s) that include operating costs for your organization
(office rent, utilities, technology costs, any OTPS expenses)

THANK YOU

Please join us again for one of our many course offerings.
Visit **www.csh.or/training**